



STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

RECEIVED

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DISCLOSURE REPORT  
CANDIDATE COMMITTEE

OFFICE OF THE  
CLERK

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

AVERY B. CHUMBLEY

(b) Committee Name:

FRIENDS OF AVERY B. CHUMBLEY

(c) Mailing Address:

100 AHAHA RD #301 Kilauea HI 96753

(d) Phone (Bus)

244-7079

(Res)

879-4801

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

☐ 1st Preliminary Primary ☐ Amended

☐ 2nd Preliminary Primary ☐ Short Form<sup>1</sup>

☐ Final Primary

☐ Preliminary General

☐ Final Election Period

☒ Supplemental

REPORTING PERIOD

1-1-99 through 6-30-99

SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS  
(Complete Section III (Part 2) on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD <sup>2</sup> TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period <sup>2</sup> (Continuing Committee) OR at the time the Organizational Report was Filed (New Committee).....		7,369.80
2. Cash on Hand at the Beginning of this Reporting Period.....	7,864.90	
3. Total Receipts with Loans (From Line 17, Column A and B).....	11,965.00	14,540.00
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	19,829.90	21,909.80
5. Total Disbursements (From Line 21, Column A and B).....	17,373.22	19,453.12
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B).....	2,456.68	2,456.68
7. (a) Total of Expenditures and Fundraising Expenditures (Unpaid) at the Beginning of this Reporting Period.....	-0-	
(b) Net Change of Expenditures and Fundraising Expenditures (Unpaid) (From Line 22, Column A).....	-0-	
(c) Total of Expenditures and Fundraising Expenditures (Unpaid) at the Closing of this Reporting Period (Add Lines 7(a) and 7(b)).....	-0-	
8. Total of Loans at the Closing of this Reporting Period (Schedule E, Line 10).....	11,899.29	
9. Debts Owed BY the Candidate Committee at the Closing of this Reporting Period (Add Lines 7(c) and 8).....	11,899.29	
10. Other Adjustments to Surplus/Deficit (Attach Explanation).....	-0-	
11. Subtotal (Add Lines 9 and 10).....	11,899.29	
12. Surplus/Deficit (Subtract Line 11 from Line 6).....	(-9,442.61)	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Candidate Signature

Date

7-29-99

Treasurer Signature

Date

7-29-99

<sup>1</sup> Short form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and received no contributions, made no expenditures, and had a deficit or surplus of \$2,000 or less for the reporting period. Short form reporting requires completion of only Section I, Section II, and Section III (Part 1) of this Disclosure Report.  
<sup>2</sup> An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

**SECTION III (Part 2)-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**  
(If Necessary, Complete Schedules A through H Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE
<b>13. Contributions From:</b>		
(a) Individuals/Other Entities/Noncandidate Committees		
(i) Monetary Contributions of \$100 or Less.....	1,915.00	1,965.00
(ii) Non-Monetary Contributions of \$100 or Less.....	- 0 -	- 0 -
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule A, Line 2 for Column A).....	10,050.00	12,575.00
(iv) Total Contributions from Individuals/Other Entities/Noncandidate Committees (Add Lines (a)(i) through (a)(iii) for Columns A and B).....	11,965.00	14,540.00
(b) Political Parties		
(i) Monetary Contributions of \$100 or Less.....	/	/
(ii) Non-Monetary Contributions of \$100 or Less.....	/	/
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule G, Line 2 for Column A).....	/	/
(iv) Total Contributions from Political Parties (Add Lines (b)(i) through (b)(iii) for Columns A and B).....	- 0 -	- 0 -
(c) Candidate or Candidate's Immediate Family		
(i) Monetary Contributions of \$100 or Less.....	/	/
(ii) Non-Monetary Contributions of \$100 or Less.....	/	/
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule D, Line 2 for Column A).....	/	/
(iv) Total Contributions from Candidate or Candidate's Immediate Family (Add Lines (c)(i) through (c)(iii) for Columns A and B).....	/	/
(d) Total Contributions (Add Lines 13(a)(iv), 13(b)(iv) and 13(c)(iv) for Columns A and B).....	11,965.00	14,540.00
<b>14. Public Funds and Other Receipts (Schedule C, Line 2 for Column A).....</b>	- 0 -	- 0 -
<b>15. Total Receipts without Loans (Add Lines 13(d) and 14 for Columns A and B).....</b>	11,965.00	14,540.00
<b>16. Loans From:</b>		
(a) Candidate or Candidate's Immediate Family (Schedule E, Line 1 for Column A).....	/	/
(b) Financial Institutions (Schedule E, Line 4 for Column A).....	/	/
(c) Other Sources (Schedule E, Line 7 for Column A).....	/	/
(d) Total Loans (Add Lines 16(a) through 16(c) for Columns A and B).....	- 0 -	- 0 -
<b>17. Total Receipts with Loans (Add Lines 15 and 16(d) for Columns A and B).....</b>	11,965.00	14,540.00
<b>DISBURSEMENTS</b>		
<b>18. Expenditures (Schedule B, Line 3 for Column A).....</b>	7,373.22	9,453.12
<b>19. Fundraising Expenditures (Schedule F, Line 3 for Column A).....</b>		
<b>20. Loans Repaid or Forgiven:</b>		
(a) Candidate or Candidate's Immediate Family (Schedule E, Line 2 for Column A).....	10,000.00	10,000.00
(b) Financial Institutions (Schedule E, Line 5 for Column A).....	/	/
(c) Other Sources (Schedule E, Line 8 for Column A).....	/	/
(d) Total Loans Repaid or Forgiven (Add Lines 20(a) through 20(c) for Columns A and B).....	10,000.00	10,000.00
<b>21. Subtotal Disbursements (Add Lines 18, 19, and 20(d) for Columns A and B).....</b>	17,373.22	19,453.12
<b>22. Expenditures and Fundraising Expenditures (Unpaid) (Schedule H, Line 7 for     Column A) (Net Change This Period).....</b>	- 0 -	
<b>23. Total Disbursements (Add Lines 21 and 22 for Columns A and B).....</b>	17,373.22	19,453.12

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE A**

**INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES  
AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100  
CANDIDATE COMMITTEE**

REMINDER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 1 OF 7

DATE OF RECEIPT AND/OR DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT (IF INDIVIDUAL)	OCCUPATION (IF INDIVIDUAL)		
1-21-99	NON-MONETARY CONTRIBUTION Hoffman LA-Roche Inc P.O. Box 333 Nutley N.J. 07110		350 <sup>00</sup>	350 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION SCD International LLC 745. Fort Street Ste 2110 Honolulu HI 96813		100 <sup>00</sup>	100 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION GOODSILL ANDERSON QUINN P.O. Box 3194 Honolulu HI 96801		100 <sup>00</sup>	100 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION BANK OF HAWAII P.A.C. P.O. Box 2900 Honolulu HI 96844		100 <sup>00</sup>	100 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION Linda Chu TAKAYAMA 1639 Hoolawa St Pearl City, HI 96782		100 <sup>00</sup>	100 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION Glen K. MURASAKA 925 CEDAR ST Honolulu HI 96814		100 <sup>00</sup>	100 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION Robert M. WITT 1585 Kapiolani Blvd #1212 Honolulu HI 96814		100 <sup>00</sup>	100 <sup>00</sup>

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE).....

950<sup>00</sup>

2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A).....

10,050<sup>00</sup>

Form CC-5(A) (7/95)

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE A**

**INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES  
AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 2 OF 7

DATE OF RECEIPT AND/OR DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT (IF INDIVIDUAL)	OCCUPATION (IF INDIVIDUAL)		
5-12-99	NON-MONETARY CONTRIBUTION STEVEN J. TRECKER 100-F NORTH KALANEOHE AVE KAILUA HI 96734		100 <sup>00</sup>	100 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION CHARLES T. JOGUCHI 47-640 HUI JULI ST KANELOE HI 96744		100 <sup>00</sup>	100 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION CLAUDIA HARRIS 3130 G NIMI ST HONOLULU HI 96819		100 <sup>00</sup>	100 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION LIN T. LAU 7A-871 FARRINGTON HWY 2ND FL WAIKAPU HI 96797		100 <sup>00</sup>	100 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION DAN & BEATTIE DAWSON 3966 NUUANU PALI DR HONOLULU HI 96817		100 <sup>00</sup>	100 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION LAWRENCE S. OKIYAMA P.O. BOX 656 HONOLULU HI 96809		100 <sup>00</sup>	100 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION c/o BAGATELOS & FADEN * 601 CALIF ST STE #1801 SAN FRANCISCO CA 94108	MARK BRAGA 801 E. TAHQUITZ CANYON STE 101 PALM SPRINGS CA. 92262	750 <sup>00</sup>	750 <sup>00</sup>

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE).....

\$ 1,350<sup>00</sup>

2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A).....

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION  
SCHEDULE A**

**INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES  
AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100  
CANDIDATE COMMITTEE**

REMINER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 3 OF 7

DATE OF RECEIPT AND/OR DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT (IF INDIVIDUAL)	OCCUPATION (IF INDIVIDUAL)		
5-12-99	NON-MONETARY CONTRIBUTION C. Brewer and CO LTD GAC P.O. Box 1826 HONOLULU HI 96805		500 <sup>00</sup>	500 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION TORKILDSON, Katz, Falsseca Etc 700 Bishop St. 15 Floor HONOLULU HI 96813		500 <sup>00</sup>	500 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION HAWAII CITIZENS RIGHTS P.O. Box 667 KAILUA HI 96734		500 <sup>00</sup>	500 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION AEB Hawaii P.A.C P.O. Box 3440 HONOLULU HI 96801		300 <sup>00</sup>	300 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION American Hawaii Cruises 700 Bishop St Ste 800 HONOLULU HI 96813		300 <sup>00</sup>	300 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION Jeffrey T. O'ND 610 WARD AVE Ste 200 HONOLULU HI 96814		250 <sup>00</sup>	250 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION G.A. RED MORRIS 222 S. Vineyard St Ste 401 HONOLULU HI 96813		250 <sup>00</sup>	250 <sup>00</sup>

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE).....

\$ 2,400<sup>00</sup>

2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 13 (iii), COLUMN A).....

Form CC-5(A) (7/95)

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION  
SCHEDULE A

INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES  
AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100  
CANDIDATE COMMITTEE

REMINER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
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CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 4 OF 7

DATE OF RECEIPT AND/OR DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT (IF INDIVIDUAL)	OCCUPATION (IF INDIVIDUAL)		
5-12-99	NON-MONETARY CONTRIBUTION UNIV. OF HAWAII Prof. Assey. U.H.P.A. P.A.C. 1017 PALM DRIVE HONOLULU HI 96814		250 <sup>00</sup>	250 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION ISLAND INSURANCE P.A.C. 1022 Bethel St HONOLULU HI 96813		250 <sup>00</sup>	250 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION ILWU P.A.C. HAWAII 451 ATKINSON DR HONOLULU HI 96814		250 <sup>00</sup>	250 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION First Hawaiian BANK BANCONVAL Ft. Street HONOLULU HI 96813		250 <sup>00</sup>	250 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION M. S. A. 2336 AHAMAKA WAY HONOLULU HI 96821		250 <sup>00</sup>	250 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION CITY BANK P.O. Box 377 HONOLULU HI		250 <sup>00</sup>	250 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION E-K Fernandez Shows Inc 91-246 OIHANA ST HONOLULU HI 96707		250 <sup>00</sup>	250 <sup>00</sup>

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE).....

\$ 1,750<sup>00</sup>

2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD

(LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A).....

Form CC-5(A) (7/95)

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION  
SCHEDULE A

INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES  
AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100  
CANDIDATE COMMITTEE

REMINDER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
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CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 5 OF 7

DATE OF RECEIPT AND/OR DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT (IF INDIVIDUAL)	OCCUPATION (IF INDIVIDUAL)		
5-12-99	NON-MONETARY CONTRIBUTION CHARLIE KING 113 MELIA ST KAPAA HI 96744		200 <sup>00</sup>	200 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION HI ASSOC OF REALTORS P.A.C. 1136 12th Ave Ste 220 HONOLULU HI 96814		200 <sup>00</sup>	200 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION MALIA MANOL 257 POLUI RD. KAILUA HI 96734		200 <sup>00</sup>	200 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION MATSON NAVIGATION CO. 333 MARKET ST SAN FRANCISCO CA 94105		200 <sup>00</sup>	200 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION General Services Inc 1001 Bishop St Ste 1570 HONOLULU HI 96813		200 <sup>00</sup>	200 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION CASTLE & COOK LC HI PO BOX 2780 HONOLULU HI 96803		150 <sup>00</sup>	150 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION WINDJAMMER CRUISES 181 ALAMOA BLVD RTA HONOLULU HI 96813		100 <sup>00</sup>	100 <sup>00</sup>

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE)..... \$ 1,250

2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD  
(LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A).....



**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION  
SCHEDULE A**

**INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES  
AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100  
CANDIDATE COMMITTEE**

REMINER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
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CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 6 OF 7

DATE OF RECEIPT AND/OR DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT (IF INDIVIDUAL)	OCCUPATION (IF INDIVIDUAL)		
5-12-99	NON-MONETARY CONTRIBUTION HAWAII STATE TEACHERS ASSOC 2828 PAA ST Ste 2050 HONOLULU HI 96819		200 <sup>00</sup>	\$1,200 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION HAWAII CONSUMER FINANCE PAC PO BOX 4109 HONOLULU HI 96812		200 <sup>00</sup>	200 <sup>00</sup>
5-12-99	NON-MONETARY CONTRIBUTION GTE Awa Tel P.A.C 1177 Bishop St # A-6 HONOLULU HI 96813		100 <sup>00</sup>	100 <sup>00</sup>
5-17-99	NON-MONETARY CONTRIBUTION HOTPAC PO BOX 30166 HONOLULU HI 96820		100 <sup>00</sup>	100 <sup>00</sup>
5-17-99	NON-MONETARY CONTRIBUTION MAUI PINEAPPLE CO PO Box 187 KAHULUI HI 96732		200 <sup>00</sup>	200 <sup>00</sup>
5-17-99	NON-MONETARY CONTRIBUTION Unity House Inc 444 HOBROW LANE PH 4B HONOLULU HI 96815		250 <sup>00</sup>	250 <sup>00</sup>
6-7-99	NON-MONETARY CONTRIBUTION The Gas Company/citizens utilities PO Box 3000 HONOLULU HI 96802		200 <sup>00</sup>	200 <sup>00</sup>

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE).....

\$1,250<sup>00</sup>

2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD

(LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A).....

Form CC-5(A) (7/95)



**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
BY INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES  
CANDIDATE COMMITTEE**

REMINDER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 7 OF 7

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	*REQUIRED IF AGGREGATE IS \$1,000 OR MORE NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION (IF INDIVIDUAL)		
6-7-99	[ ] NON-MONETARY CONTRIBUTION HMSA P.A.-C PO Box 860 HONOLULU HI 96808		250 <sup>00</sup>	250 <sup>00</sup>
6-15-99	[ ] NON-MONETARY CONTRIBUTION AMFAC NON-Candidate Committee PO Box 340 HONOLULU HI 96802		100 <sup>00</sup>	100 <sup>00</sup>
6-15-99	[ ] NON-MONETARY CONTRIBUTION DAVID A. HEENAN 900 FORT ST #1450 HONOLULU HI 96813		200 <sup>00</sup>	200 <sup>00</sup>
6-15-99	[ ] NON-MONETARY CONTRIBUTION ATE T 500 ALAMONA BLVD 3 WATERFONT PLAZZA STE 405 HONOLULU HI 96813		350 <sup>00</sup>	350 <sup>00</sup>
	[ ] NON-MONETARY CONTRIBUTION			
	[ ] NON-MONETARY CONTRIBUTION			
	[ ] NON-MONETARY CONTRIBUTION			
	[ ] NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (THIS PAGE)..... 900<sup>00</sup>
2. TOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A)..... 10,050<sup>00</sup>

Form CC-3(A) (Rev. 11/97)

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 1 OF 4

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
1-6-99	EMURA JEWELRY 49 MARKET ST WAILUKU HI 96793	Trophy For Girls Soccer TOURNY	80 <sup>00</sup>
1-20-99	KOZO SUSHI 1150 Bishop st HAWAII HI 96813	FOOD for opening Day '99	206 <sup>14</sup>
1-26-99	LIONS CLUB MAUI 100 HAWOLI ST # 308 WAILUKU HI 96793	Advertising For BENEFIT GOLF TOURNY	75 <sup>00</sup>
1-26-99	U.S POST OFFICE HAWAII HI, 96813	STAMPS	66 <sup>00</sup>
1-26-99	MAUI NEWS 160 MAHALANI ST WAILUKU HI 96793	Political Advertising	110 <sup>00</sup>
2-22-99	RADIO MAUI 311 PNO ST KAHULUI HI 96732	Political Advertising	156 <sup>00</sup>
2-22-99	COSTCO, SALT LAKE HAWAII HI 96813 REIMBURSEMENT to AVERY B. CUMBLEY	Food & Beverages supplies For opening day '99	174 <sup>11</sup>

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 867<sup>25</sup>
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM FORM CC-5(H) (SCHEDULE H), LINE 4).....
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18, COLUMN A)..... 7,373<sup>22</sup>

Form CC-5(B) (7/95)

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 2 OF 4

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
3-11-99	AG Leadership Foundation of Hawaii UNIV OF HAWAII MANOA, HONOLULU HI 96813	DONATION	100 <sup>00</sup>
3-11-99	MFD PARTNERS AMFAC PLAZA 745 FORT ST lobby HONOLULU HI 96813	AMFAC Exhibition HALL RENTAL fee HALL-F.R	992 <sup>19</sup>
4-5-99	U.S. Post office Downtown station HONOLULU HI 96813	Stamps	44 <sup>00</sup>
4-11-99	Loomis Inc 450 PIIKOI ST HONOLULU HI 96814	Media Advertising Newspaper FIR Tickets printing	1,819 <sup>70</sup>
4-20-99	MAUI FOOD BANK Kaliuloi Maui, HI 96732	FOOD BANK DONATION	150 <sup>00</sup>
4-20-99	KAUAI FOOD BANK Lihue Kauai, HI	FOOD BANK DONATION	150 <sup>00</sup>
4-22-99	CLAUDIA HARRIS 3031 G Nini st HONOLULU HI 96819	reimbursement for fundraiser supplies	54 <sup>07</sup>

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... \$ 3,310<sup>04</sup>
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM FORM CC-5(H) (SCHEDULE H), LINE 4).....
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18, COLUMN A).....

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 3 OF 4

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
4-26-99	Ellsworth Simeona 45-020 Oopuhue PL Kaneohe HI 96744	Musicians for HNL Fundraiser	200 <sup>00</sup>
4-29-99	Kenny's Rest & Deli 1620 N. School St Honolulu HI 96817	CATERING for HNL fundraiser	1,500 <sup>00</sup>
4-23-99	Fisher Hawaii 1025 Alekua St Honolulu HI 96813	Name tags, receipt Book for HNL fundraiser	17 <sup>99</sup>
4-30-99	Dem. Century Club of Maui 24 N. Churn St #407 Wailuku HI 96793	ANNUAL DUES Democratic Club	100 <sup>00</sup>
5-5-99	MFD Partners 700 Bishop St. Honolulu HI 96813	Parking fees @ AMFAC PLAZZA for F/R volunteers	24 <sup>00</sup>
5-6-99	Matt Matsunaga 1100 Bishop St Honolulu HI 96813	Legislative Staff Mahalo Luncheon 99 session	207 <sup>83</sup>
6-2-99	Loomis Inc 450 Piikoi St Ste 200 Honolulu HI 96814	F/R Tickets News paper ads Account Services	513 <sup>11</sup>

- SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... \$2,562<sup>93</sup>
- TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM FORM CC-5(H) (SCHEDULE H), LINE 4).....
- TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18, COLUMN A).....

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 4 OF 4

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
6-3-99	U-S POST OFFICE DOWNTOWN BRANCH HAWAII HI 96813	Stamps	33 <sup>00</sup>
6-24-99	KAUAI FOOD BANK 3285 WAAPA RD Lihue HI 96766	Sponsorship Advertising Donation	130 <sup>00</sup>
7-23-99	OOKAS Supermarket 1870 MAIN ST WAILUKU HI	MAUI SR CITIZENS ANNUAL LUNCHEON two 25 <sup>00</sup> gift cert.	50 <sup>00</sup>
7-12-99	ILWU Pensioners Club 4154 HARDY ST Lihue HI 96766	SODA FOR ANNUAL PENSIONERS PICNIC	50 <sup>00</sup>
6-24-99	South MAUI Learning Center 27 Nohokai St. Kihei HI 96753	Political AD Sponsorship on web site	370 <sup>00</sup>
/			

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE)..... 633<sup>00</sup>
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM SCHEDULE H, LINE 4).....
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 1B, COLUMN A)..... 7,373<sup>22</sup>

Form CC-5(B) (Rev. 11/97)

**STATE OF HAWAII**  
**CAMPAIGN SPENDING COMMISSION**  
**SCHEDULE E**  
**LOANS**  
**CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

AVERY B. CHUMBLEY Friends of AVERY B. CHUMBLEY

**LOANS FROM CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY**

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN AMOUNT REPAYED OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD
Prior to 1-1-95	AVERY B. CHUMBLEY 100 AUNANA RD #301 KIHU, HI 96753	21,899 <sup>29</sup>	-0-	10,000 <sup>00</sup>	11,899 <sup>29</sup>

1. TOTAL OF LOANS FROM CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18(a), COLUMN A).....

-0-

2. TOTAL OF LOANS REPAYED OR FORGIVEN THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 20(a), COLUMN A).....

\$10,000<sup>00</sup>

3. TOTAL OF LOANS FROM CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY AT THE CLOSING OF THIS REPORTING PERIOD.....

\$11,899<sup>29</sup>

**LOANS FROM FINANCIAL INSTITUTIONS**

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF FINANCIAL INSTITUTION	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN AMOUNT REPAYED OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD

4. TOTAL OF LOANS FROM FINANCIAL INSTITUTIONS THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18(b), COLUMN A).....

5. TOTAL OF LOANS REPAYED OR FORGIVEN THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 20(b), COLUMN A).....

6. TOTAL OF LOANS FROM FINANCIAL INSTITUTIONS AT THE CLOSING OF THIS REPORTING PERIOD.....

**LOANS FROM OTHER SOURCES**

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF SOURCE OF OTHER LOAN	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN AMOUNT REPAYED OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD

7. TOTAL OF LOANS FROM OTHER SOURCES THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 18(c), COLUMN A).....

8. TOTAL OF LOANS REPAYED OR FORGIVEN THIS PERIOD (ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 2), LINE 20(c), COLUMN A).....

9. TOTAL OF LOANS FROM OTHER SOURCES AT THE CLOSING OF THIS REPORTING PERIOD.....

10. TOTAL OF LOANS AT THE CLOSING OF THIS REPORTING PERIOD (ADD LINES 3, 6 AND 9 AND ENTER TOTAL ON THE DISCLOSURE REPORT, SECTION III (PART 1), LINE 8).....

\$11,899<sup>29</sup>

Form CC-5(E) (Rev. 11/97)